Owner's Guide

Performer®

a-dec®

85.2632.00

Products List | Print | Table of Contents

Warranty Information

Serial Number _____

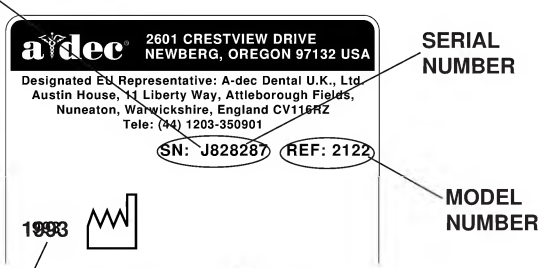
Model Number _____

Date Purchased _____

Date of Service	Model/Description of Service	Technician's Initials

ALPHABETICAL EQUIVALENT TO THE NUMERAL OF THE MONTH MANUFACTURED

A	January
B	February
C	March
D	April
E	May
F	June
G	July
H	August
I	September
J	October
K	November
L	December



Performer Equipment Serial Number Location:

- **Delivery System:** Underneath the control head
- **Cuspidor:** Underneath the cuspidor
- **Assistant's Instrumentation:** Underneath the assistant's instrumentation module
- **Light:** On the end of the light post
- **Chair:** On the upper structure, under the upholstery

For service information contact your local authorized A-dec dealer.

Check with local codes and A.D.A. (Americans with Disabilities Act) requirements for installation of this product.

A-dec warrants its products against defects in material or workmanship for one year from time of delivery (except for handpieces which have a warranty period of six months). A-dec's sole obligation under the warranty is to provide parts for the repair, or at its option, to provide the replacement product (excluding labor). The buyer shall have no other remedy. (All special, incidental, and coincidental damages are excluded.) Written notice of breach of warranty must be given to A-dec within the warranty period. The warranty does not cover damage resulting from improper installation or maintenance, accident or misuse. The warranty does not cover damage resulting from the use of cleaning, disinfecting or sterilization chemicals and processes. The warranty also does not cover light bulbs. Failure to follow instructions provided in A-dec's Operation and Maintenance Instructions (Owner's Guide) may void the warranty.

NO OTHER WARRANTIES AS TO
MERCHANTABILITY OR OTHERWISE ARE MADE

a-dec®

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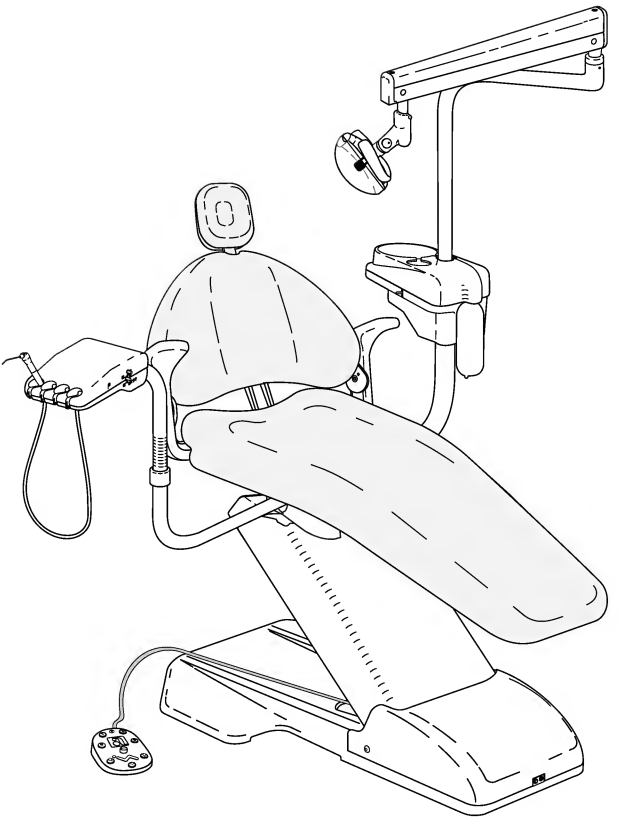
Performer



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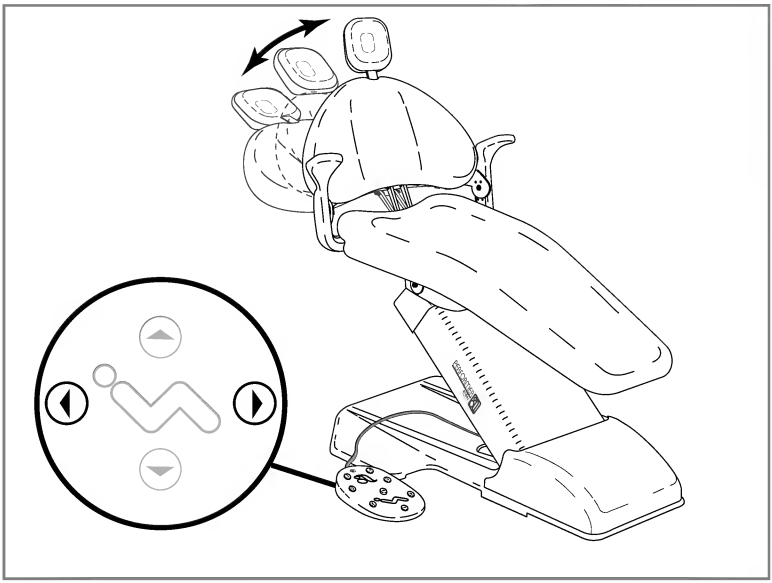
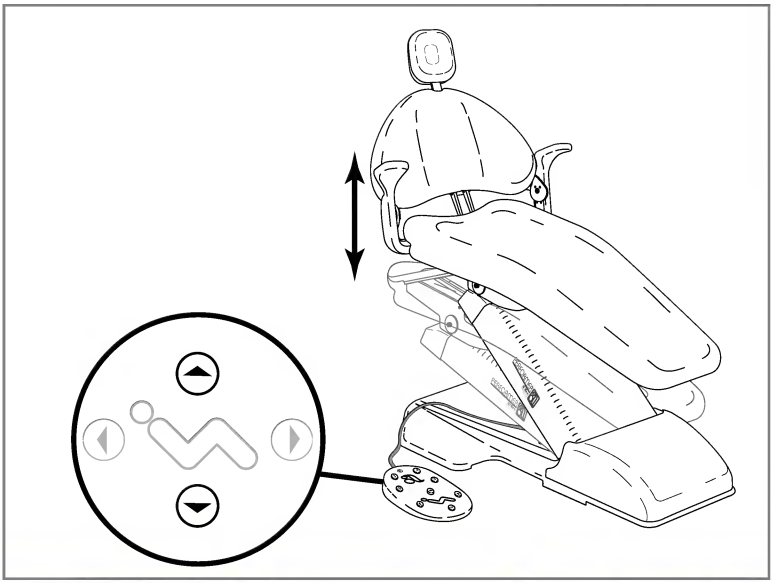
For recommended asepsis instructions, refer to your Equipment Asepsis Owner's Guide, A-dec Publication No. 85.0696.00.

Back Positioning

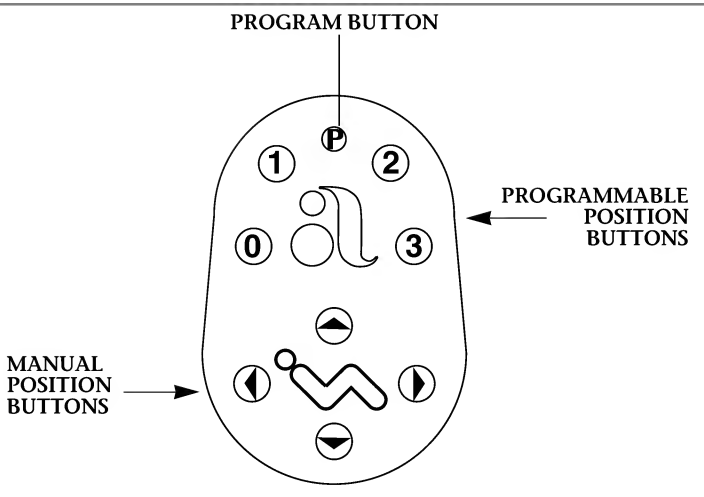


Seat Positioning



Performer II Chair Only
Programming Positions 0, 1, or 2

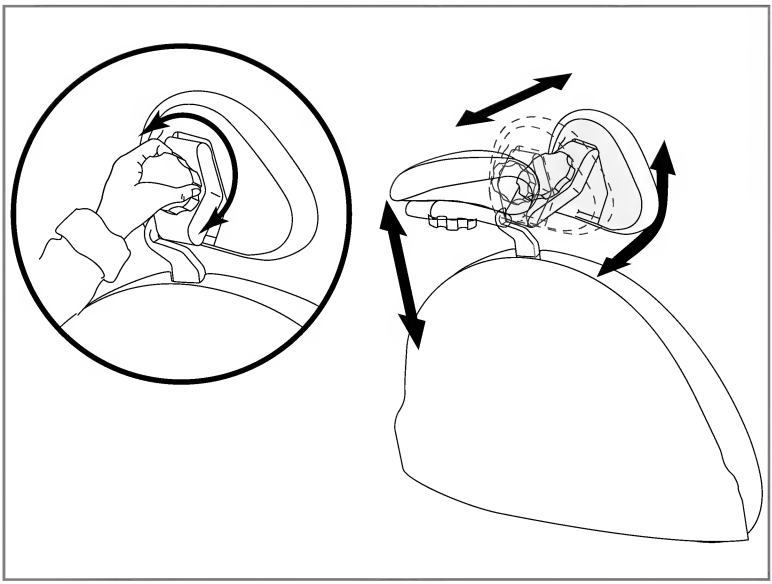
- Move the chair to the desired operating position.
- Press the program button. A tone will sound.
- Press the programmable position button for the desired setting (0, 1, or 2) within 4 seconds.
- A tone will sound 3 times confirming the position has been reprogrammed.



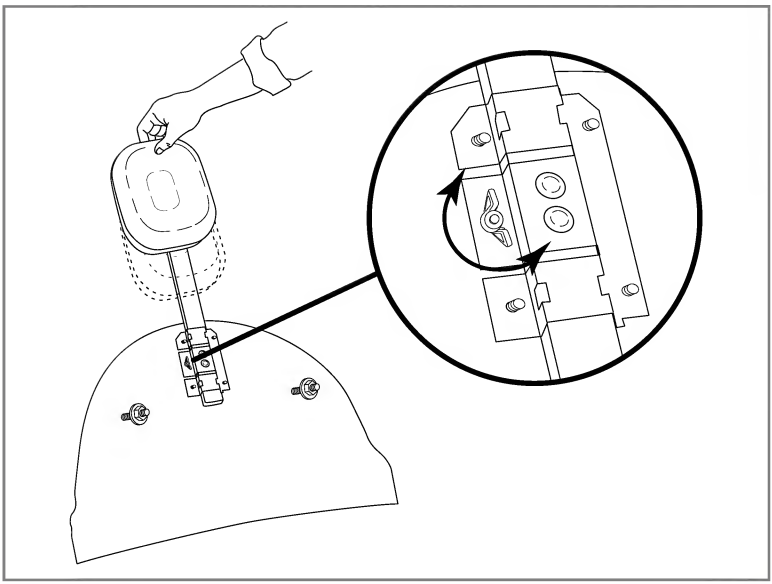
Position 3 is factory set in the Cuspidor/Return mode. Pressing the position 3 button moves the chair back up allowing patient access to the Cuspidor. Pressing the position 3 button a second time returns the patient to the previous operating position.

Position 3 may also be used as a third programmable position or as a last position recall. Contact an authorized A-dec dealer to have position 3 reconfigured to a programmable position or as a last position recall.

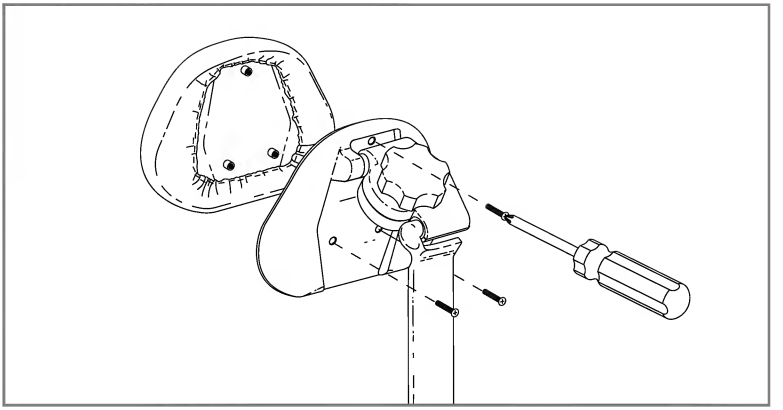
Double-Articulating Headrest Positioning

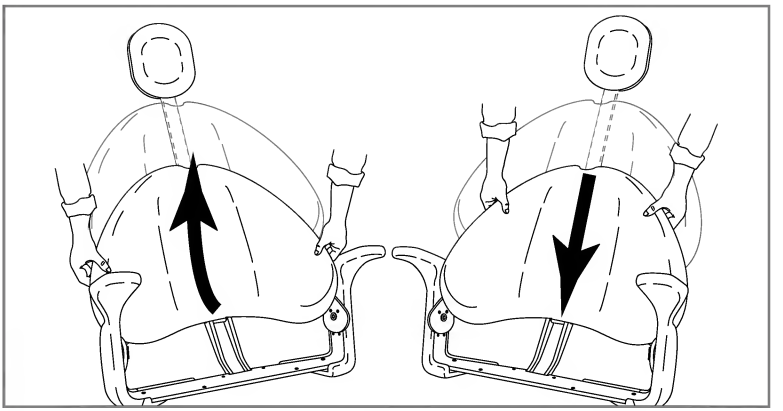


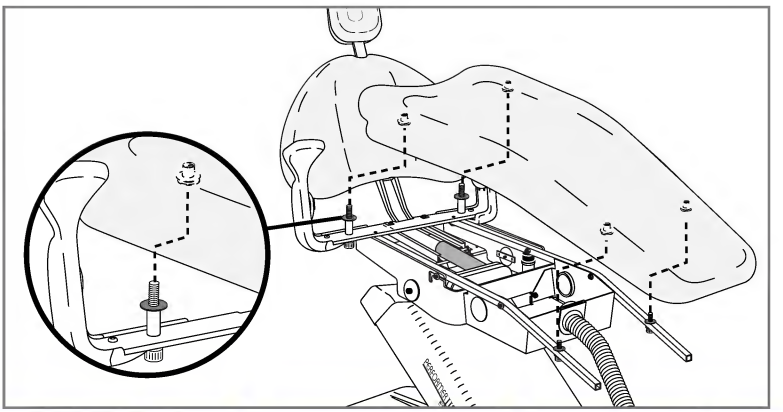
Headrest Glide Bar Tension Adjustment



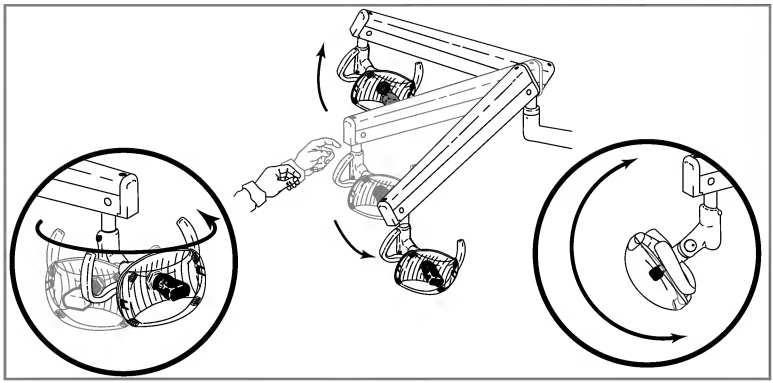
Upholstery Replacement



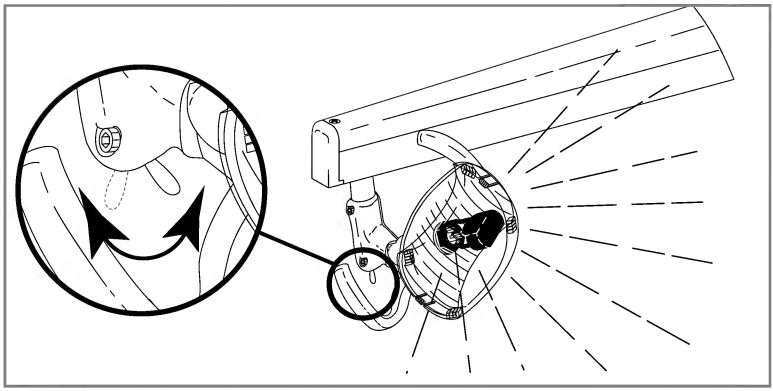




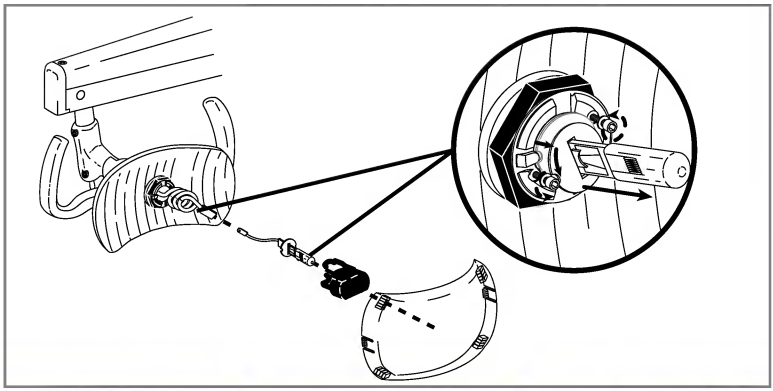
Positioning Light Head



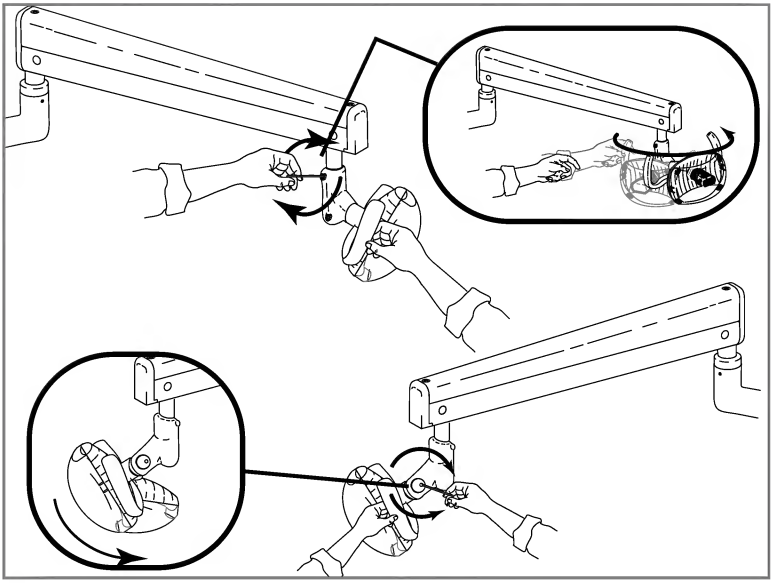
Light On/Off



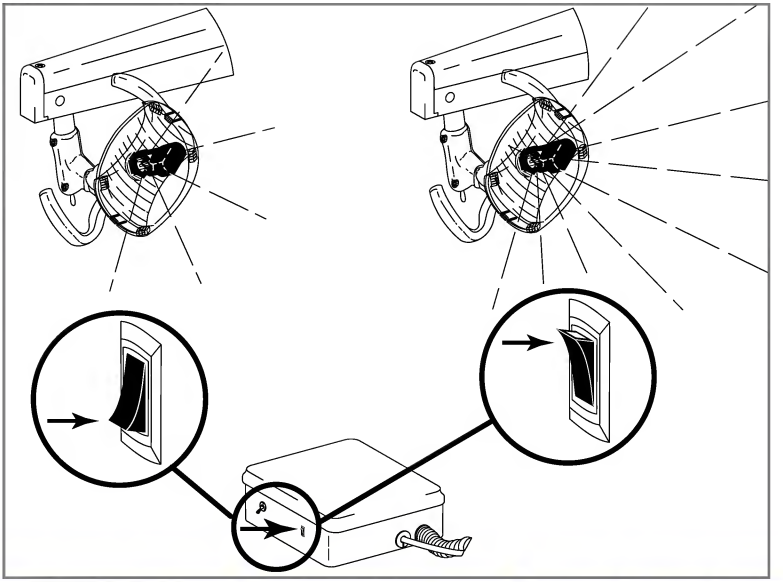
Dental Light Bulb Replacement



Horizontal and Vertical Pivot Adjustments

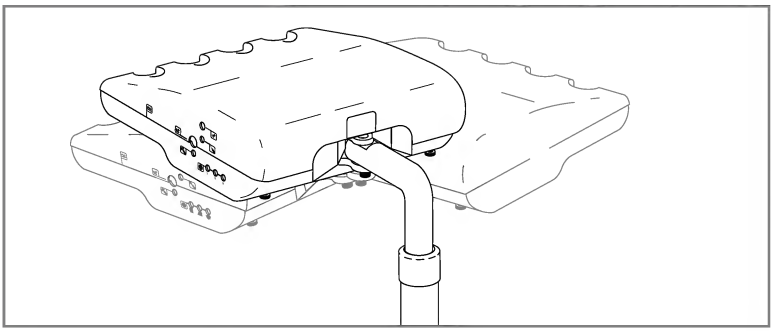


Light Intensity

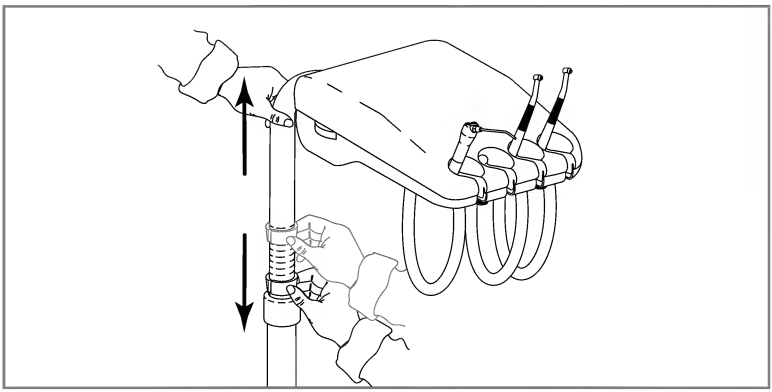


Control Head Adjustments

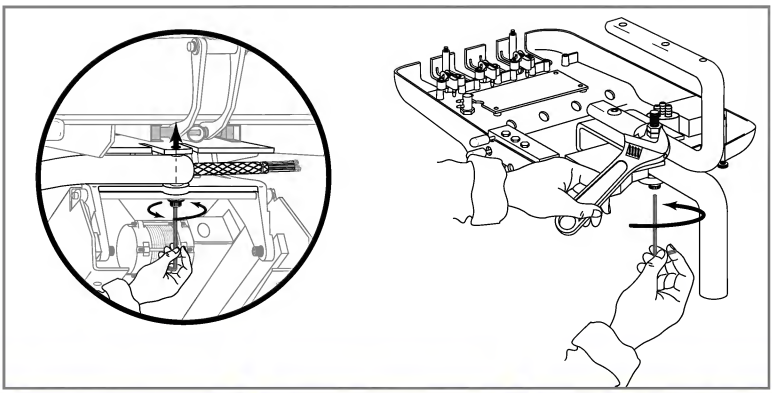
Positioning the Control Head



Adjusting Control Head Height

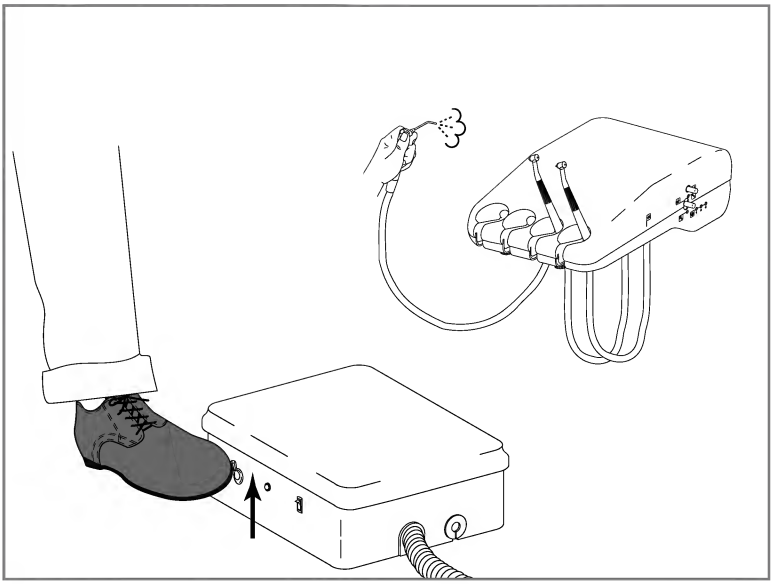


Pivot Point Tension Adjustments

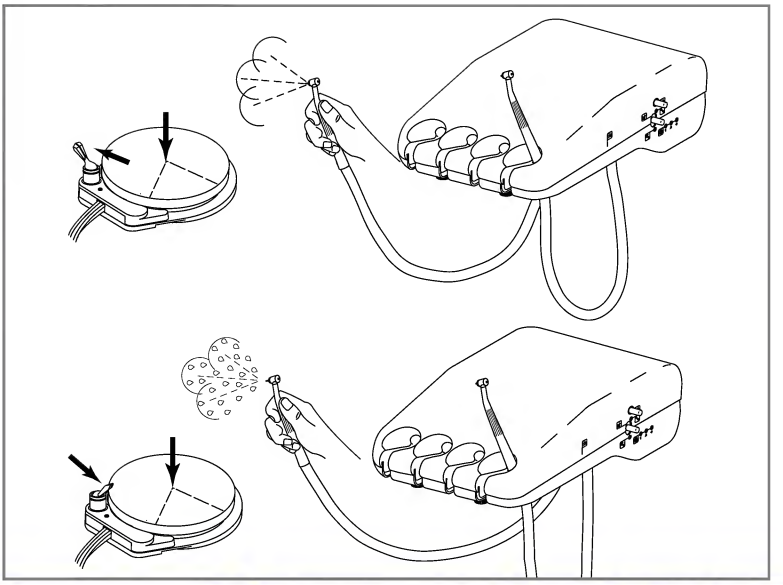


Handpiece and Foot Control

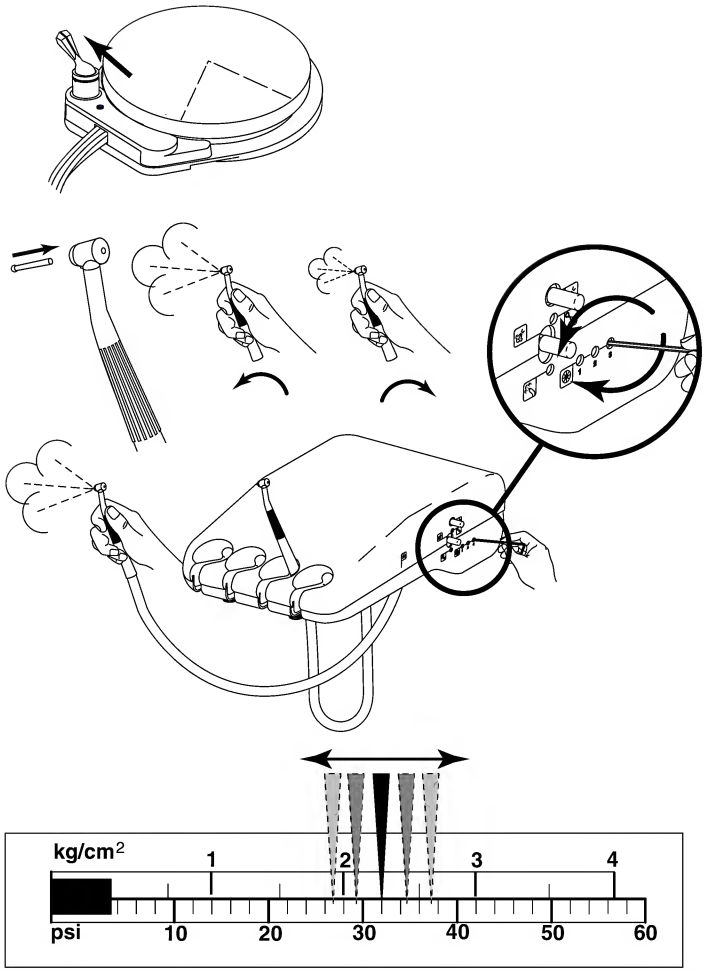
Master On/Off Toggle



Wet/Dry Toggle



Drive Air Adjustment



NOTE

The drive air control must be adjusted to meet the handpiece manufacturer's maximum dynamic drive air pressure specification.

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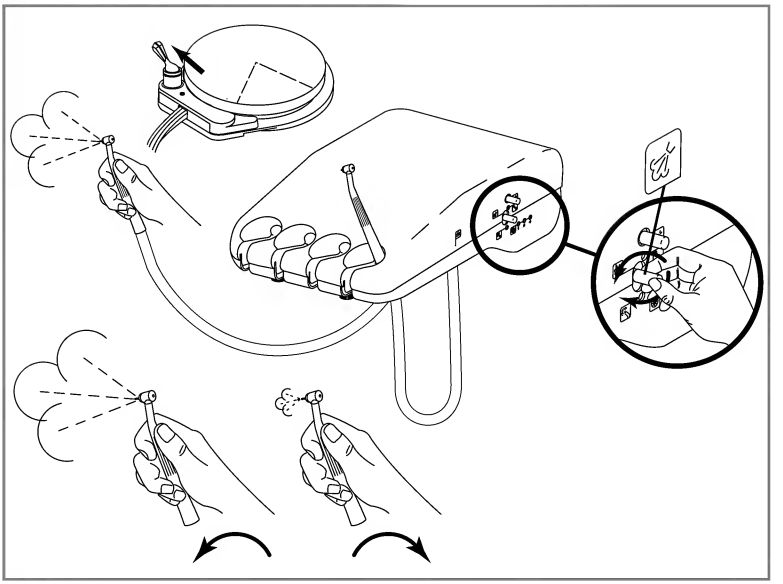
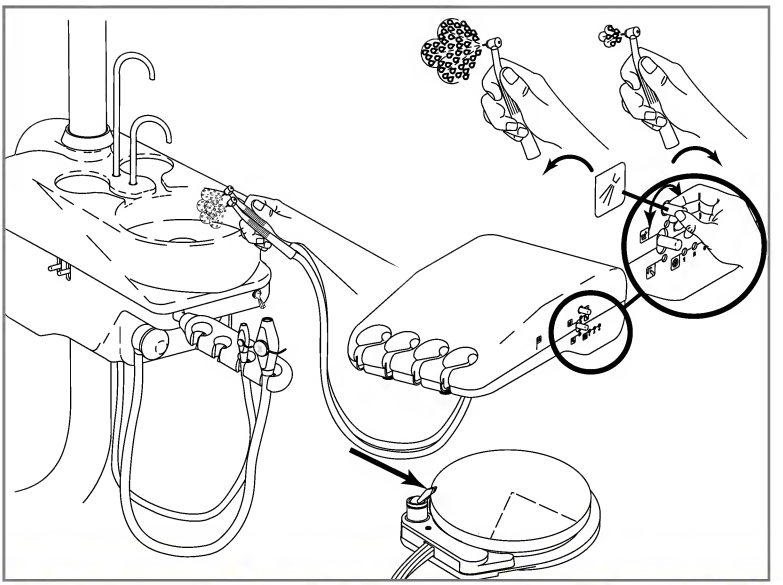
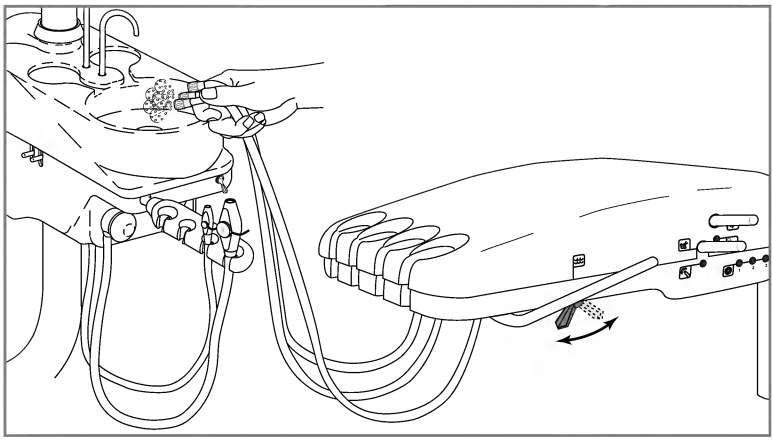
Coolant Air Adjustment



Coolant Water Adjustment



Handpiece Tubing Flush



The handpiece tubing flush system flushes more water through the tubings in less time than is normally possible when operating the foot control only. The handpieces should not be connected when flushing the tubings.

How Often Should the Handpiece Tubings be Flushed?

After Each Patient:

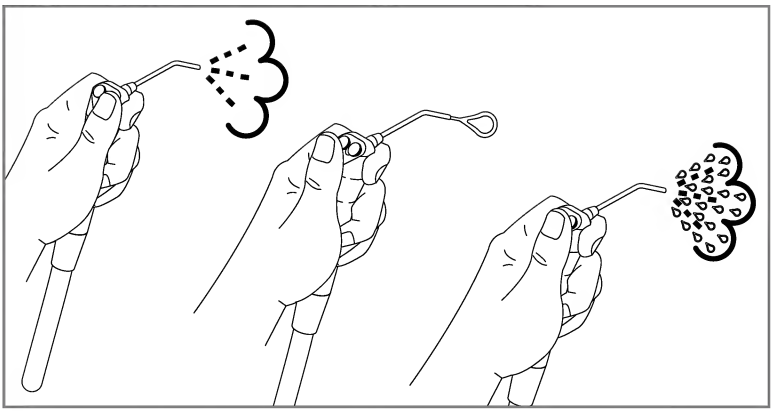
Flush the tubings for about 20–30 seconds.

At the beginning of Each Day:

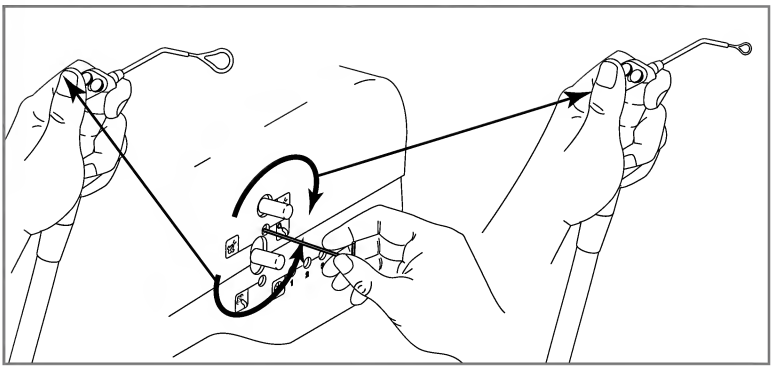
Flush the tubings for 2–3 minutes.

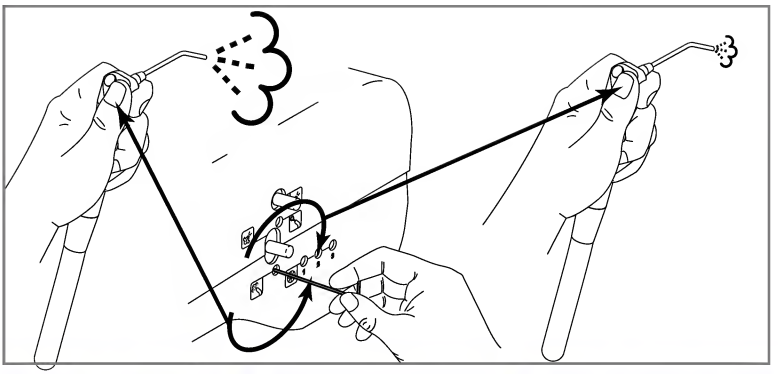
Autoclavable Syringe

Using the Autoclavable Syringe

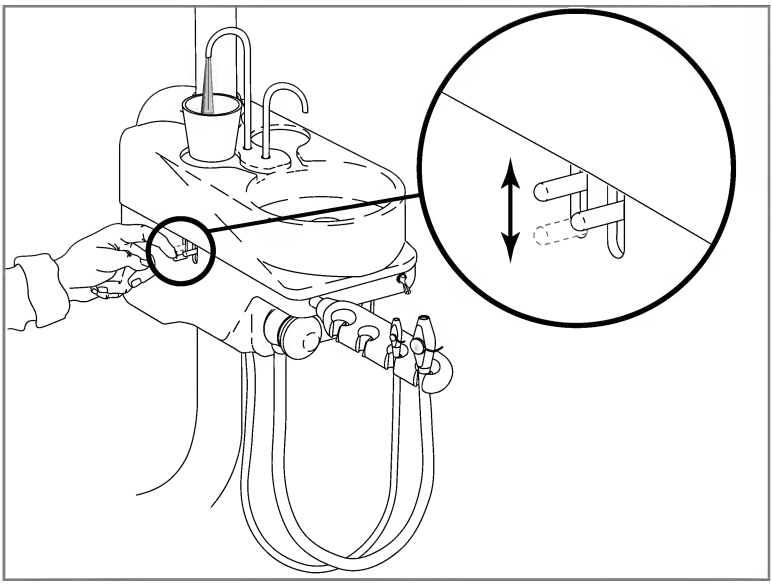


Autoclavable Syringe Flow Adjustment

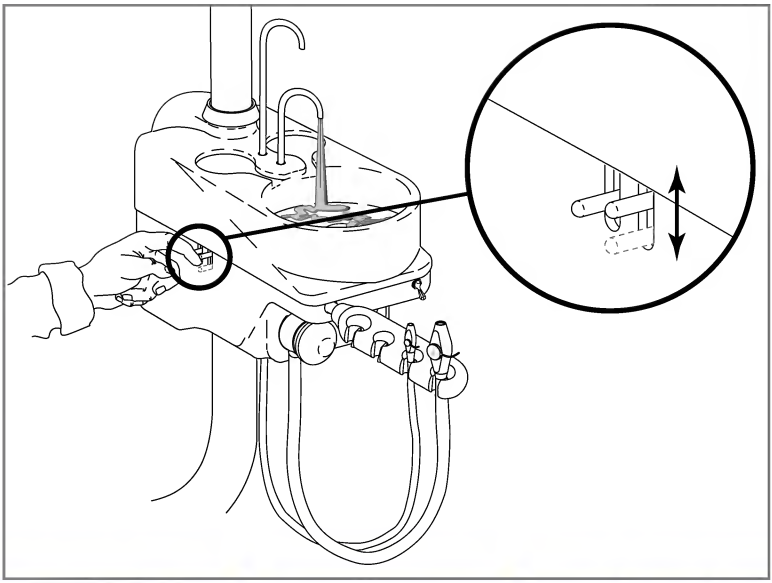




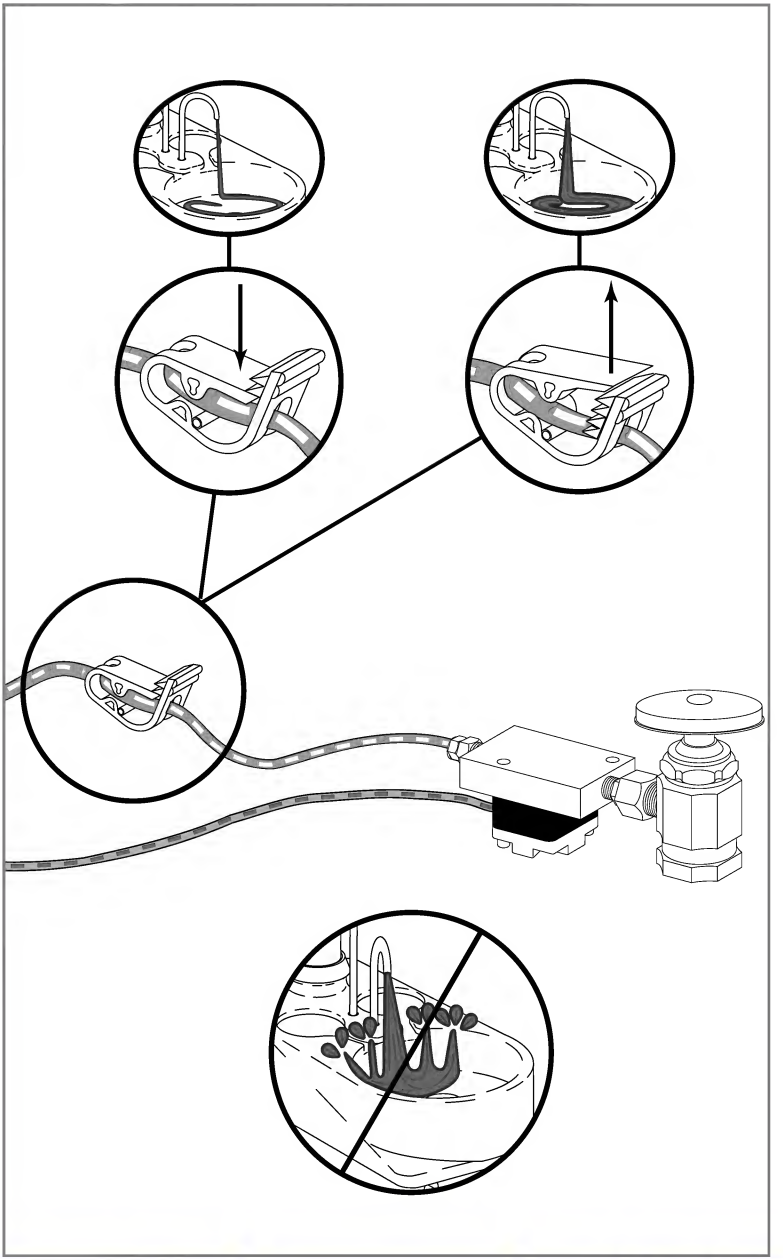
Cup Fill



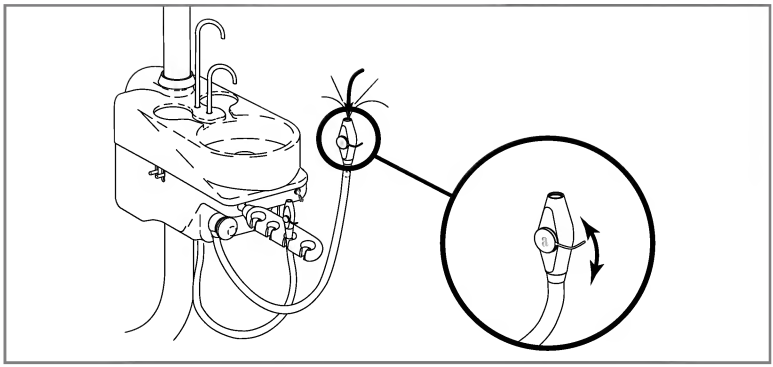
Bowl Rinse



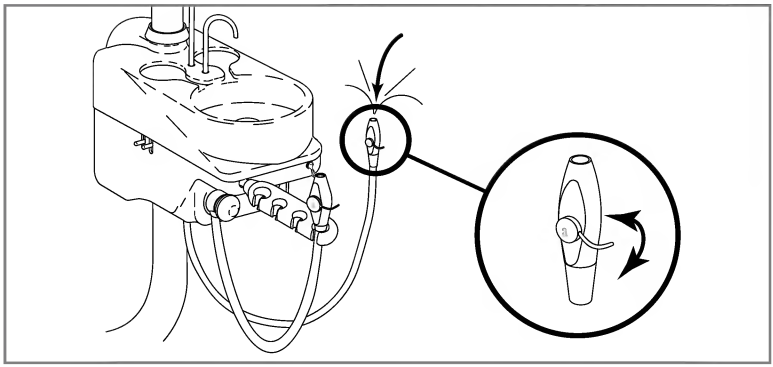
Cuspidor Water Flow Adjustment



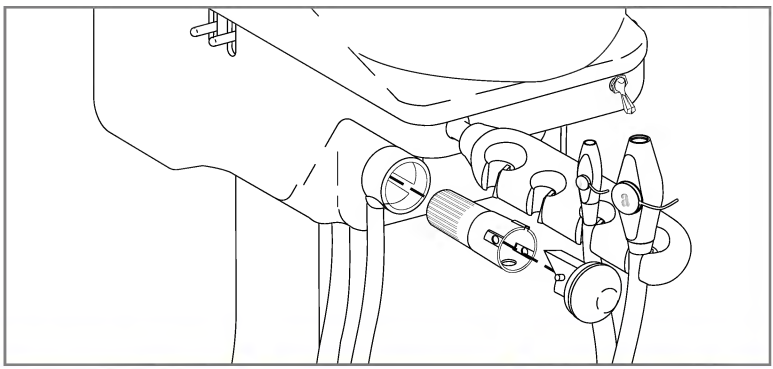
Autoclavable HVE



Autoclavable Saliva Ejector

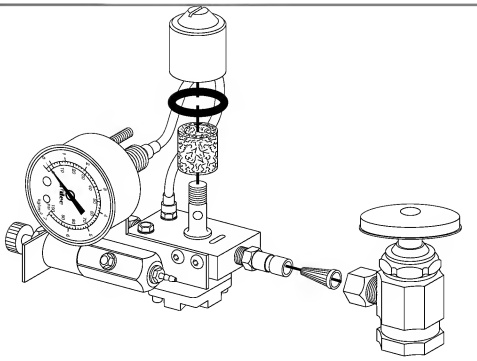


HVE Screen

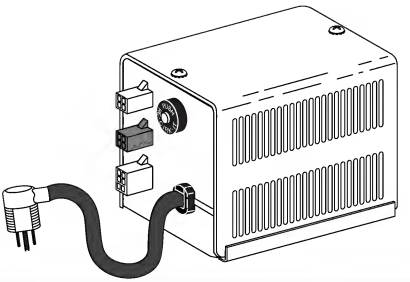


Floor Box Accessories

Replacing Filters



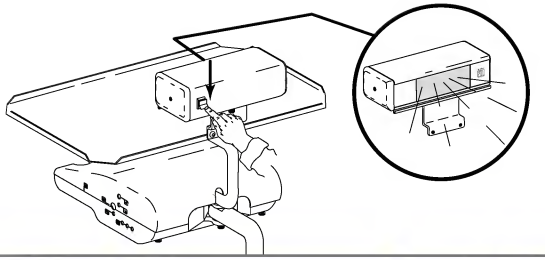
Power Supply



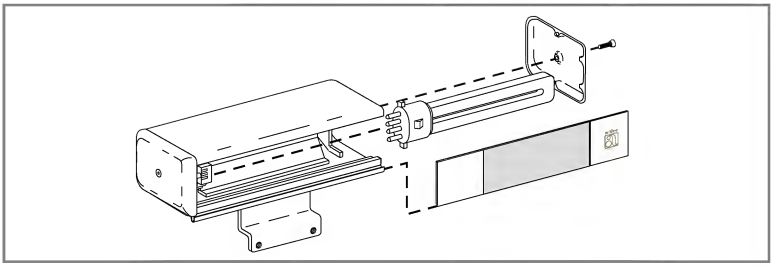
NOTE

No cleaning or maintenance required. If the power supply has an indicator light, it is on when the power supply is plugged in.

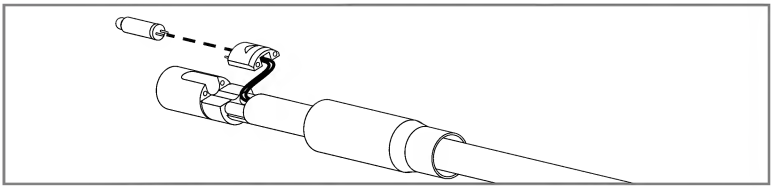
Bitewing Viewer



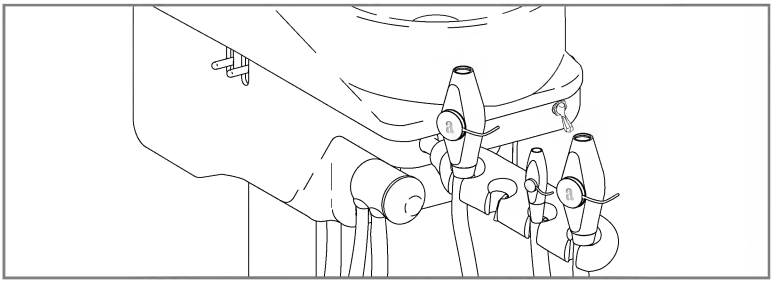
Changing Bitewing Viewer Bulb



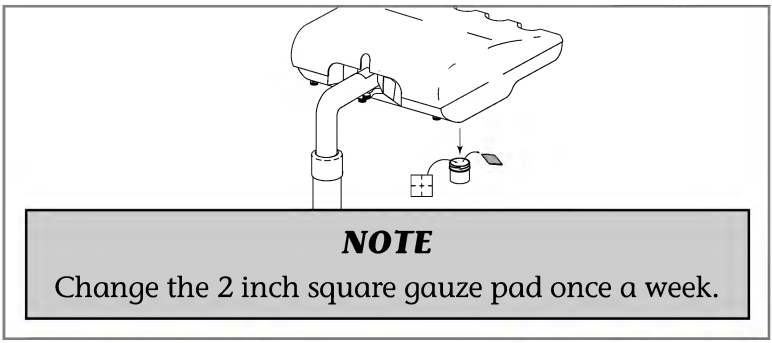
Changing Fiber-Optic Bulb



Dual HVE



Oil Collector



NOTE

Change the 2 inch square gauze pad once a week.

Adjustments and Specifications

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Autoclavable Syringe
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Minimum air, water, and vacuum service requirements for proper unit operation:
- Air: 2.50 cfm (70.80 l/min) at 80 psi (551 kPa).
- Water: 1.50 gpm (5.68 l/min) at 40 psi (276 kPa).
- Vacuum: 12 cfm (339.84 l/min) at 8 inches (27 kPa) of mercury.

Maximum control head weight is 55 lbs. (30 kg).
Maximum moment at the chair created by the freestanding control head is 63 ft. lbs. (85.42 N·m).
Maximum cuspidor and light weight is 27 lbs. (12.25 kg).
Maximum moment at the chair created by the cuspidor and light is 82 ft. lbs. (111.18 N·m).
Weight of optional scaler: 2 lbs. (.91 kg).
Chair Capacity:
- Patient Load: 300 lbs (135 kg) maximum.
- Accessory Load: 130 lbs. (59.0 kg) maximum.

Specifications are subject to change without notice.

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Safety Considerations for Accessory Equipment

The use of accessory equipment not complying with the equivalent safety requirements of this equipment may lead to a reduced level of safety of the resulting system.

Consideration relating to the use of accessory equipment shall include:

Evidence that Safety Certification of the accessory equipment has been performed in accordance to the appropriate IEC 601 and IEC 601-1 Harmonized National Standards.

Transporting the Performer Dental Unit

When transporting the Performer Dental Unit the chair base should be fully down, and the chair back should be fully up.

The delivery system should be over the seat upholstery and the light should be centered above the chair.

The delivery system and light should be secured to prevent movement. The entire Dental Unit should be secured to the transporting vehicle.

General Information

Identification of Symbols

Recognized by Underwriters Laboratories Inc. ® with respect to electric shock, fire and mechanical hazards only in accordance with UL 2601-1. Recognized with respect to electric shock, fire, mechanical and other specified hazards only in accordance with CAN/CSA C22.2, No. 601.1.

UL listed to US (UL 544) and Canadian (CAN/CSA C22.2, No. 125) safety standards.

Classified by Underwriters Laboratories Inc. ® with respect to electric shock, fire and mechanical hazards only in accordance with UL 2601-1. Classified with respect to electric shock, fire, mechanical and other specified hazards only in accordance with CAN/CSA C22.2, No. 601.1.

Conforms to European Directives *(refer to Declaration Statement)*

Protective earth (ground).

Functional earth (ground).

Attention, consult accompanying documents.

TYPE B APPLIED PART.

CLASS II EQUIPMENT.

Classification of Equipment (EN 60601-1)

Type of shock protection:

CLASS I EQUIPMENT
(Dental Chairs, Dental Lights, & Power Supplies)

CLASS II EQUIPMENT
(Chair, Wall, & Cart Mounted Delivery Systems)

Degree of shock protection:

TYPE B APPLIED PART (All products)

Degree of protection against water ingress:

ORDINARY EQUIPMENT (All products)

Mode of operation

CONTINUOUS OPERATION
(All models except Dental Chairs)

Mode of operation

CONTINUOUS OPERATION
WITH INTERMITTENT LOADING (Dental Chairs)

a-dec®

2601 Crestview Drive
Newberg, Oregon 97132 U.S.A.
Telephone 1-800-547-1883
(503) 538-7478
Fax (503) 538-0276

a-dec
international, inc.

Designated Representative's Address:
A-dec Dental U.K., Ltd.
Austin House
11 Liberty Way
Attleborough Fields,
Nuneaton, Warwickshire.
England. CV11 6RZ.
Telephone: 00 44 24 7635 0901
Fax: 00 44 24 7634 5106

Designated Representative's Address:
A-dec Australia
41-43 Bowden Street
Alexandria, N.S.W. 2015, Australia
Telephone: (61) 1.800.225010

85.2632.00
1999-03 Rev H
(00480)

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Printed in the USA.
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